PATENT APPLICATION FEE DETERMINATION RECORD									Application of Docket Number			
Effective December 8, 2004										0/	5442	75
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	TITY	, OR	OTHER SMALL	
	LANOITAN S	STAGE FEES	(Colum	nn 1)	Γ-	(Column 2)	7	RATE	T 666	7		
<u> </u>							-		FEE	4.	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)-			All other situations =		BASIC FEE	ļ	OR	BASIC FEE	300
EXAMINATION FEE			(4) = \$50/\$100		,	\$ 100 / \$ 200		EXAM, FEE			EXAM. FEE	SM
SEARCH FEE			U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400			All other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 ≠		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			33 minus 20 =		•	13		X \$ 25 =		OR	X \$ 50 =	650
IND	EPENDENT C	LAIMS .	\Q "	ninus 3 =	•	3		X \$ 100 =		OR	X \$ 200 =	1500
MU	TIPLE DEPEN	IDENT CLAIM PR	ESENT					+ \$ 180 =		OR	+\$360=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
[]	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
MTA		CLAIMS REMAINING AFTER AMENOMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 33	Minus	" 3	3	= \		X \$ 25 = \	,	OR	×\$50€	
AME	independent	. 6	Minus	••• (, 0	= '	Γ	X \$ 100 =		OR	X \$ 200 =	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ī	+ \$ 180 =		OR	+ \$ 360 =	
			1	OTAL ADDIT. FEE	-	OR	TOTAL ADDIT.	7				
											,	
_		(Column 1)		(Colum		(Column 3)	г	··				4554
2		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		-		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	•••		E.		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					L	+ \$ 180 =		OR	+ \$ 360 =		
			T	FEE		OR	TOTAL ADDIT. FEE					
						•						1
• }	I the entry in ord-	mn 1 is less than the	entry in enhann 9	wells Wh		3						
* 1	f the "Highest Nu	mber Previously Paid mber Previously Paid	FOR IN THIS SP	ACE is less (than '20'	, enter "20".					•	
		ber Previously Paid (n the a	ppropriate box	in column 1.			ł

FORM PTO-875 (Rev. 02/2005)

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